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PHILIPPE P. MARC MARC P. MARC MARC P. MARC MARC P. MARC					
**CORRECTION VERTICAL 20					
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Foreign priority claimed 35 USC 119 conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no		AS FILED	STATE OR COUNTRY	SHEETS DRWGS.	TOTAL CLAIMS
Verified and Acknowledged Examiner's Initials		INDEP. CLAIMS	FILING FEE RECEIVED	ATTORNEY'S DOCKET NO.	
ADDRESS DEPT. P.O. BOX ALBANY					
TITLE DEPT. P.O. BOX ALBANY					

U.S. DEPT. OF COMM. / PAT. & TM—PTO-436L (Rev.12-94)

INFORMATION COMPLETELY		Application Examiner	
NOTICE OF ALLOWANCE MAILED		CLAIMS ALLOWED	
Assistant Examiner		Total Claims	Print Claim
ISSUE FEE		DRAWING	
Amount Due	Date Paid	Sheets Drwg.	Figs. Drwg.
Label Area		Print Fig.	
Primary Examiner		ISSUE BATCH NUMBER	
PREPARED FOR ISSUE			
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